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**UTILITY
PATENT APPLICATION
TRANSMITTAL**(Only for new nonprovisional application under
37 CFR 1.53(b))Attorney Docket No.:
First Named Inventor:

Title:

Express Mail Label No.:

380-107 CON-2
JOY MANGANO

PORTABLE MIRROR

EV 171218471 US

U.S. PTO
61922

09/12/03

APPLICATION ELEMENTS

See MPEP chapter 6000 concerning design patent application contents

ADDRESS TO: Commissioner for Patents
P.O. Box 1450

Alexandria, VA 22313-1450

03970
10/

<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <i>(submit an original, and a duplicate for fee processing)</i></p> <p>2. <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 12] (preferred arrangement set forth below, MPEP 1503.01) <ul style="list-style-type: none"> - Descriptive Title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (<i>if filed</i>) - Detailed Description - Claim(s) - Abstract of the Disclosure </p> <p>4. <input checked="" type="checkbox"/> Drawings(s) (37 CFR 1.152) [Total Sheets 8]</p> <p>5. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 2] <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <ul style="list-style-type: none"> a. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior appl., see 37 CFR 1.63(d)(2) and 1.33(b) </p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>	<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies </p>
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ACCOMPANYING APPLICATION PARTS

- 9. Assignment Papers (cover sheet & document(s))
- 10. 37 CFR 3.73(b) Statement Power of Attorney (when there is an assignee)
- 11. English Translation Document (*if applicable*)
- 12. Information Disclosure Statement (IDS) PTO-1449 Copies of IDS Citations
- 13. Preliminary Amendment
- 14. Return Receipt Postcard (MPEP 503) (*Should be specifically itemized*)
- 15. Certified Copy of Priority Document(s) (*If foreign priority is claimed*)
- 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
- 17. Other - Petition to Make Special & Form 2038

18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No. 10/059,802

Prior application information: Examiner: Rick D. Shafer Group Art Unit: 2872

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label (*Insert Customer No. or Attach bar code label here*) or Correspondence address below

Name	Galgano & Burke				
Address	300 Rabro Drive, Suite 35				
City	Hauppauge	State	New York	Zip Code	11788
Country	USA	Telephone	631-582-6161	Fax	631-582-6191
Name (Print/Type)	Thomas M. Galgano	Registration No. (Attorney/Agent)	27,638		
Signature	Date: September 12, 2003				

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington DC 20231.
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FEE TRANSMITTAL FOR FY 2003

Effective 01/01/2000. Patent fees are subject to annual revision

 Applicant claims small entity status.

See 37 CFR1.27

TOTAL AMOUNT OF PAYMENT (\$) 880.00**Application Number:****Filing Date:****First Named Inventor:****Examiner Name:****Group Art Unit:****Attorney Docket No.:**

JOY MANGANO

380-107 CON-2

METHOD OF PAYMENT (check all that apply)
 Check Credit Card Money Order Other None
 Deposit Account:

Deposit Account Number: 07-0130

Deposit Account Name: Galgano & Burke

The Commissioner is authorized to: (check all that apply)

- Charge fee(s) indicated below
- Credit any overpayments
- Charge any additional fee(s) during the pendency of this application except for issue fee
- Charge fee(s) indicated below, except for filing fee to the above-identified deposit account.

FEE CALCULATION**1. BASIC FILING FEE****Large Entity** **Small Entity**

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	750	2001	375	Utility filing fee	\$ 750.00
1002	330	2002	165	Design filing fee	_____
1003	520	2003	260	Plant filing fee	_____
1004	750	2004	375	Reissue filing fee	_____
1005	160	2005	80	Provisional filing fee	_____

SUBTOTAL (1) (\$) 750.00**2. EXTRA CLAIMS FEES FOR UTILITY & REISSUE**

Extra Claims	Fee from below	Fee Paid
Total Claims	13 - 20** =	_____ x _____ = _____
Independent Claims	2 - 3** =	_____ x _____ = _____

Multiple Dependent _____ = _____

Large Entity **Small Entity**

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20 Independent claims in excess of 3
1201	84	2201	42	Multiple dependent claim, if not paid
1203	280	2203	140	**Reissue independent claims over original patent
1204	84	2204	42	**Reissue claims in excess of 20 and over original patent
1205	18	2205	9	_____

SUBTOTAL (2) (\$) 880.00**or number previously paid, if greater;
For Reissues, see above**FEE CALCULATION (continued)****3. ADDITIONAL FEES****Large Entity** **Small Entity**

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing	_____
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	_____
1053	130	1053	130	Non-English specification	_____
1805	2520	1812	2520	For filing a request for ex parte reexamination	_____
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	_____
1805	1840*	1805	1840*	Requesting publication of SIR after Examiner action	_____
1251	110	2251	55	Extension for reply within first month	_____
1252	410	2252	205	Extension for reply within second month	_____
1253	930	2253	465	Extension for reply within third month	_____
1254	1450	2254	725	Extension for reply within fourth month	_____
1255	1970	2255	985	Extension for reply within fifth month	_____
1401	320	2401	160	Notice of Appeal	_____
1402	320	2402	160	Filing a brief in support of an appeal	_____
1403	280	2403	140	Request for oral hearing	_____
1451	1510	1451	1510	Petition to institute a public use proceeding	_____
1452	110	2452	55	Petition to revive - unavoidable	_____
1453	1300	2453	650	Petition to revive - unintentional	_____
1501	1300	2501	650	Utility issue fee (or reissue)	_____
1502	470	2502	235	Design issue fee	_____
1503	630	2503	315	Plant issue fee	_____
1460	130	1460	130	Petitions to the Commissioner	\$130.00
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	_____
1806	180	1806	180	Submission of Information Disclosure Stmt	_____
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	_____
1809	750	2809	375	Filing a submission after final rejection 37 CFR §1.129(a))	_____
1810	750	2810	375	For each additional invention to be examined 37 CFR §1.129(b))	_____
1801	750	2801	375	Request for Continued Examination (RCE)	_____
1802	900	1802	900	Request for expedited examination of a design application	_____

Other fee (specify) _____

SUBTOTAL (3) \$130.00

*Reduced by Basic Filing Fee Paid

SUBMITTED BY**COMPLETE (if applicable)****Name (Print/Type)** Thomas M. Galgano**Registration No.** 27,638**Telephone:** 631-582-6161**Signature****Date:** Sept. 12, 2003

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